

What is the value of the Brain Injury Services Program in Iowa?

Frequently Asked Questions

Is Brain Injury an important health problem? Yes. While the death rate from brain injury is decreasing, the number if Iowan's surviving moderate and severe brain injury is on the rise and there has been an increase in the number of emergency room visits. 33,430 Iowans sustained a traumatic brain injury in the year 2014. More than 30,000 of these individuals were seen in emergency departments compared with 13,852 emergency department visits in 2009.^{1,2} In Iowa, falls and motor vehicle crashes are the leading causes of brain injury and there has been a significant increase in awareness of the impact of mild to moderate brain injury from concussions resulting from sporting activities.

Are the services of the Brain Injury Services Program reaching these Iowans? Yes. By utilizing the statewide trauma registry the Iowa Dept. of Public Health is able to contact all individuals identified with brain injury to inform them of the services available in the BISP. In addition, the Brain Injury Alliance of Iowa maintains an Iowa Brain Injury Resource Network of more than 230 hospitals, medical clinics, and other health and service locations across the state, which refer then to the BISP Neuro Resource Facilitation (NRF) program. Thus the NRF program has had more than 25,000 Iowa calls and contacts in 2015 and is actively serving more than 3,900 Iowans with brain injury, families and caregivers.



¹ IDPH, TBI Annual Brief, 2016

² IDPH, Special Emphasis Report: Traumatic Brain Injury, 2014

Are the services of the Brain Injury Services Program having an impact? Most certainly! The major service of the BISP is *Neuro Resource Facilitation* (NRF). NRF is a national “best practice” and is supported by more than 40 states. NRF is designed to work with Iowans with brain injury and their families to navigate the medical, psychological, inter-personal, vocational, and material impact of brain injury. Staff actively works to educate clients about brain injury, to connect them to needed services and to keep them connected. The result is many more Iowans who, despite a temporary or permanent disability from brain injury, avoid dropping out of school, unemployed, entering inpatient psychiatric care, becoming incarcerated, going without needed funding and services, and unnecessary state support in the form of Medicaid funding.

In consideration of the State’s investment in Iowa’s Brain Injury Services Program at the Iowa Department of Public Health, what’s the return? The return on investment can be calculated by considering the monetary value of the services and the State’s contribution toward the Brain Injury Services Program (Appropriations). In an investment market where 7% return is considered very good the State’s return from supporting the Brain Injury Services Program is ***astounding***:

Value of BISP Services since 2008 = \$17,245,981

State Investment in BISP since 2008 = \$6,079,576

$17,245,981 - 6,079,576 = 11,166,405 / 6,079,576 = 1.84$ or a **184% return**

The value of BISP services include the following:

- 1. Psychiatric inpatient day costs avoided via Neuro resource facilitation services.*
- 2. State prison day costs avoided via Neuro resource facilitation services.*
- 3. County Jail day costs avoided via Neuro resource facilitation services.*
- 4. State portion of Medicaid enrollment costs avoided via Neuro resource facilitation services*
- 5. Federal grant funds leveraged for brain injury systems change by IDPH (IDPH Reported).*
- 6. Out-of-state placement for neuro-behavioral services avoided via BISP training services.*